## 15020050457

## FEC FORM 2 STATEMENT OF CANDIDACY

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ECRET	ARY OF THE SENATE

1.	(a) Name of Candidate (in full)  Mr. Joseph Simon Donnelly				الله کا	entification Number
	(b) Address (number and street) PO Box 891	☐ Check if addres	s changed		2. Candidate's FEC Id S2IN00091	entification Number
	(c) City, State, and ZIP Code	**************************************				New Amended
	Indianapolis	IN	46204		***************************************	(N) OR (A)
4.	Party Affiliation	5. Office Sought			strict of Candidate	
	DEMOCRATIC PARTY	Senate		IN	00	
7.	I hereby designate the following na	, ,	y Principal C	Campaign Com	nmittee for the 2018 (year of el	election(s).
	NOTE: This designation should be	tiled with the appropriate offic	e istea in tr	e instructions.		
	(a) Name of Committee (in full)  Donnelly for Indiana	a				
	(b) Address (number and street) 1050 17th St NW Ste 590	\$				
	(c) City, State, and ZIP Code					
	Washington			DC	20036	
•	I hereby authorize the following na candidacy.  NOTE: This designation should be			-	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
_	(a) Name of Committee (in full)					
	Indiana Senate 201	2				
	(b) Address (number and street) 120 Maryland Ave NE					or depoted the state of the sta
	(c) City, State, and ZIP Code					<del> </del>
	Washington			DC	20002	
	l certify that I have ex	amined this Statement and to	the best of i	my knowledge	and belief it is true, corre	ct and complete.
Si	gnature of Candidate				Date	
Je	oseph S. Donnelly	sh S. Von	nelly		12/06/2012	2/1/12
N	OTE: Submission of alse, erroneou	s, or incomplete information m	nay subject t	he person sign	ning this Statement to pen	alties of 2 U.S.C. §437g.
	1	90.00				
	75					<del></del>

## FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

2 / 2 Page FEC Form 2 (Rev. 02/2003) [ ADDITIONAL ] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) Hoosiers for a Better Indiana (b) Address (number and street) 115 W Washington St Ste 1165 (c) City, State and ZIP Code Indianapolis IN 46204 [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street)

(c) City, State and ZIP Code

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Donnelly for Indiana 1050 17th St NW, Ste 590 Washington, DC 20036

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